

APPLICATION FOR NOMINATION TO U. S. SERVICE ACADEMY

IF YOU ARE INTERESTED IN A NOMINATION TO A U.S. SERVICE ACADEMY FOR THE CLASS ENTERING IN JULY 2004, AND ARE A RESIDENT OF THE 5TH CONGRESSIONAL DISTRICT OF ILLINOIS AND A U.S. CITIZEN, PLEASE COMPLETE THIS APPLICATION. THE APPLICATION AND ALL NECESSARY ATTACHMENTS **MUST BE RECEIVED BY THE CONGRESSMAN'S DISTRICT OFFICE NO LATER THAN NOVEMBER 8, 2003.**

SEND COMPLETED APPLICATION TO:

U.S. REPRESENTATIVE RAHM EMANUEL
ATTN: ROSETTA SEXTON
3742 W. IRVING PARK ROAD
CHICAGO, ILLINOIS 60618
773-267-5926

PLEASE TYPE OR PRINT CLEARLY IN INK

YOU MAY SELECT MORE THAN ONE ACADEMY. PLEASE RANK YOUR CHOICES FROM 1 THROUGH 4 (1 BEING YOUR FIRST CHOICE). **GIVE CAREFUL THOUGHT AND CONSIDERATION TO YOUR FIRST CHOICE OF AN ACADEMY. OTHER CHOICES MAY BE CONSIDERED ONLY IN THE EVENT THAT THERE ARE NOT A SUFFICIENT NUMBER OF NOMINEES.**

MILITARY ☐ NAVY ☐ AIR FORCE ☐ MERCHANT MARINES ☐

PERSONAL INFORMATION

NAME

| | | |
|----------------|-------------|--------------------------|
| ADDRESS | CITY | STATE ZIP CODE +4 |
|----------------|-------------|--------------------------|

| | | |
|--------------|------------|-----------------------|
| PHONE | FAX | E-MAIL ADDRESS |
|--------------|------------|-----------------------|

| | |
|-------------------------------|----------------------|
| SOCIAL SECURITY NUMBER | DATE OF BIRTH |
|-------------------------------|----------------------|

| | |
|----------------------------|------------------------|
| NAME OF HIGH SCHOOL | GRADUATION DATE |
|----------------------------|------------------------|

| | |
|---------------------|--------------|
| HIGH SCHOOL ADDRESS | PHONE NUMBER |
|---------------------|--------------|

| | |
|-----------------------------------|--------------|
| NAME OF SCHOOL GUIDANCE COUNSELOR | PHONE NUMBER |
|-----------------------------------|--------------|

| | | | |
|---------------|---------|------------------|--------------|
| MOTHER'S NAME | ADDRESS | CITY, STATE, ZIP | PHONE NUMBER |
|---------------|---------|------------------|--------------|

| | | | |
|---------------|---------|------------------|--------------|
| FATHER'S NAME | ADDRESS | CITY, STATE, ZIP | PHONE NUMBER |
|---------------|---------|------------------|--------------|

HAVE YOU REQUESTED A NOMINATION FROM ANY OTHER
SOURCE(S)? YES _____ NO _____

IF YES, WHICH SOURCE(S)?

ARE YOU EMPLOYED AFTER SCHOOL? ____ DURING THE SUMMER? ____

IF SO, WHERE AND HOW MANY HOURS PER WEEK?

EXTRACURRICULAR ACTIVITIES (ATTACH ADDITIONAL SHEETS IF NECESSARY)

| <u>ACTIVITY</u> | <u>YEARS PARTICIPATED</u> | <u>OFFICES/POSITIONS HELD</u> | <u>AWARDS</u> |
|-----------------|---------------------------|-------------------------------|---------------|
|-----------------|---------------------------|-------------------------------|---------------|

ATHLETICS PARTICIPATION (ATTACH ADDITIONAL SHEETS IF NECESSARY)

| <u>SPORT</u> | <u>YEARS PLAYED</u> | <u># OF VARSITY LETTERS</u> | <u>AWARDS</u> |
|--------------|---------------------|-----------------------------|---------------|
|--------------|---------------------|-----------------------------|---------------|

ACADEMICS

1. HIGH SCHOOL TRANSCRIPT: YOU (OR YOUR HIGH SCHOOL) MUST SUBMIT AN OFFICIAL COPY OF YOUR TRANSCRIPT WHICH MUST INCLUDE YOUR GRADE POINT AVERAGE.

2. _____
CLASS RANK OUT OF DATE

3. COLLEGE BOARD TEST SCORES: THE CODE NUMBER FOR OUR OFFICE IS 1677. WHEN TAKING THE SAT OR ACT, PLEASE MARK 1677 SO THAT OUR OFFICE RECEIVES VERIFICATION OF YOUR SCORES.

4. ANY ADDITIONAL NECESSARY ACADEMIC INFORMATION

5. PERSONAL MOTIVATION ESSAY

ON A SEPARATE PAGE, PLEASE ANSWER THE FOLLOWING QUESTION USING A MINIMUM OF 125 AND MAXIMUM OF 250 WORDS.

EXPLAIN WHY YOU ARE SEEKING A MILITARY ACADEMY NOMINATION AND HOW YOU WILL BE A BENEFIT TO THE ARMED FORCES.

6. LETTERS OF RECOMMENDATION

PLEASE ASK THREE AND ONLY THREE PEOPLE TO SUBMIT LETTERS ON YOUR BEHALF TO THE DISTRICT OFFICE.

I HAVE READ THE INFORMATION SHEET EXPLAINING NOMINATION PROCEDURES AND AM FAMILIAR WITH THE REQUIREMENTS. IF I HAVE NOT SUBMITTED ALL THE NECESSARY DATA BY THE NOVEMBER 8, 2003, DEADLINE, I UNDERSTAND FULLY THAT I WILL NOT BE CONSIDERED.

SIGNATURE

DATE

INFORMATION SHEET

STUDENTS SHOULD APPLY TO THE ACADEMY IN THE SPRING OF THEIR JUNIOR YEAR.

BASIC ACADEMY ELIGIBILITY REQUIREMENTS

TO BE ELIGIBLE FOR AN APPOINTMENT TO A U.S. ACADEMY, A YOUNG MAN OR WOMAN MUST MEET THE FOLLOWING BASIC REQUIREMENTS:

AGE MUST BE AT LEAST 17 YEARS OF AGE BUT HAVE NOT PASSED HIS OR HER 23RD BIRTHDAY ON JULY 1ST OF THE YEAR HE/SHE PLANS TO ENROLL. THE AGE LIMIT FOR THE MERCHANT MARINE ACADEMY IS 25.

CITIZENSHIP

MUST BE A U.S. CITIZEN.

RESIDENCY MUST BE LEGALLY DOMICILED IN THE 5TH CONGRESSIONAL DISTRICT OF THE STATE OF ILLINOIS.

CHARACTER

MUST HAVE GOOD MORAL CHARACTER

MARITAL STATUS MUST BE UNMARRIED, NEVER HAVE BEEN MARRIED AND HAVE NO DEPENDENTS

ACADEMIC ACADEMIC STANDARDS VARY FOR EACH ACADEMY.

PLEASE CONTACT THE INDIVIDUAL ACADEMY FOR THE ACADEMIC REQUIREMENTS.

MEDICAL MEDICAL STANDARDS VARY FOR EACH ACADEMY.

PLEASE CONTACT THE INDIVIDUAL ACADEMY FOR THE MEDICAL STANDARDS NOMINATION PROCESS

Applications for military academy nominations will be reviewed by a committee selected by Congressman Emanuel at the end of the year. The committee may nominate up to ten candidates for each academy vacancy. Under the competitive method of the military academies, the academy rates the ten candidates. The top candidate is then offered an appointment to the academy.

SAMPLE LETTER OF REQUEST FOR CONGRESSIONAL NOMINATION

U.S. Representative Rahm Emanuel
Attn: Rosetta Sexton
3742 W. IRVING PARK ROAD
CHICAGO, ILLINOIS 60618

Dear Congressman Emanuel:

It is my desire to attend the _____ . I respectfully request that I be considered as one of your nominees for the class entering in July 2004.

The following personal data are provided for your information:

Full name: (Print as recorded on birth certificate)

Name of Parents:

Address: (Include both permanent and mailing address. Use ZIP code and provide phone number)

Date and Place of Birth

Sex:

Social Security Number:

High School Attended: (Include address)

Date of High School Graduation:

My approximate Standing is _____ in a class of _____ .

I have / have not sent a Pre-candidate Questionnaire to the Academy.

I have requested my high school transcript of work completed to date to be forwarded to your office as soon as possible. I have also requested the results of any ACT or SAT tests I have taken to be forwarded to your office.

I would greatly appreciate your consideration of my request for one of your academy nominations.

Sincerely

(Signature)

DO NOT WRITE IN THIS SPACE. FOR OFFICE USE ONLY

Application received:

SAT/ACT scores received:

High School transcript received:

Three letters of recommendation received:

ACADEMY CHECKLIST

**PLEASE MAKE SURE THAT THE FOLLOWING ITEMS ARE RECEIVED BY
U.S REPRESENTATIVE RAHM EMANUEL'S DISTRICT OFFICE NO LATER
THAN NOVEMBER 8, 2003.**

_____ LETTER OF REQUEST FOR CONGRESSIONAL NOMINATION

_____ APPLICATION FOR NOMINATION TO MILITARY ACADEMY

_____ THREE LETTERS OF RECOMMENDATION

_____ ACT OR SAT SCORES

_____ HIGH SCHOOL TRANSCRIPT
(Please be sure the transcript includes your GPA and class rank)

_____ PERSONAL MOTIVATION ESSAY

**NOTE: THESE ITEMS CAN BE SENT SEPARATELY WITHOUT THE
APPLICATION AS LONG AS THEY ARE RECEIVED IN THE
DISTRICT OFFICE BY THE NOVEMBER 8, 2003
DEADLINE.**